NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

Please read the instruction before completing. Attach additional sheets if necessary DEC 17 2009

COM	IMISSION	
ON	ETHICS	

PERSONAL INFORMATION:						COMMI ON ET		
NAME: Michael Everett Miller			LENGTH OF RESIDENCE IN NEVADA: 24 Years					
ADDRESS: 55 West Williams Avenue								
CITY, STATE, ZIP: Fallon, NV 89406			LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE:  2 Years					
TELEPHONE: (775) 423-5107			E-MAIL: mem@ci.fallon.nv.us					
SECTION A (Public Office): List all public offices for which thi and check each box accordingly i.e. annual, candidate or app					ed			
Title of Public Office and Name of Government	Elected, appointed or appointed	(E, A, AE)	Annual Compensation	Date elected or appointed	ANNUAL NRS 281A.600.1 & 281A.610.1	CANDIDATE NRS 281A.610.1(a).	APPOINTMENT NRS 281A.600.1	
					Check the	appropriate	boxes below	
Assistant City Engineer, City of Fallon	Α	\$ 60	,000	Jul 1, 2009	<b>✓</b>		<u> </u>	
		\$						
		\$					1	
SECTION B (Sources of Income): List each source of your inc any member of your household who is 18 years of age or olde				urce listed in	Section A	Н	ousehold Member	
Churchill County Scho	ool Distric	t					✓	
					.	<u> </u>		
SECTION C (Real Property): List specific location and particut which you or a member of your household has a legal or benefinore; and (3) located in this state or an adjacent state. NRS 2 Specific Location  None	eficial intere	est; (			f which is			

Name of Public Officer: Michael Evere	ett Miller		an.
	whom you or a member of your household owes \$5,000 or mo your personal residence; and (2) debt on a motor vehicle for	personal t Self	
	None	<u>b</u>	oxes
	Notice		
ALL STATE OF THE S			
value of \$200 from a donor during the preceding you within the third degree of consanguinity of	nor and value of each gift if all gifts received are in excess of a ing taxable year [EXCEPT: (1) a gift received from a person w r affinity; and (2) ceremonial gifts received for a birthday, wede sion if the donor does not have a substantial interest in your le 620.1(e).	ho is relat ding,	ed to
None	\$	value or	Ont
	\$		
	\$		
	\$		
you or a member of your household is involve	usiness, trust joint venture, syndicate, corporation or associati d as a trustee, beneficiary of a trust, director, officer, owner in of stock or security representing 1% or more of the total outst 281A.620.1(f).	whole or	in part,
			Household
		Self Check th	Member e appropriate
			oxes
	None	<u> </u>	
THE INFORMATION I HAVE PROVIDED HER	EIN IS ACCURATE AND COMPLETE.		
Date: Dec 16, 2009	Signature: Millian January Willy		
	Print Name: Michael Everett Miller		
WILEDE TO EILE.	Print Name:		
WHERE TO FILE:	ELECTED PUBLIC OFFICERS OR CANDIDATES		
APPOINTED PUBLIC OFFICERS SUBMIT TO:	SUBMIT TO:		
Nevada Commission on Ethics 3476 Executive Pointe Way, Suite 10	Nevada Secretary of State, Elections Division 101 North Carson Street, Suite 3		
Carson City, Nevada 89706 775.687.5469 • 775.687.1279 fax	Carson City, Nevada 89701 775.684.5705 • 775.684.5718 fax		

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